Debtor 1	DENNIS	F.	GREEN
_	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing)	First Name	Middle Name	Last Name
Jnited States E Case number	Bankruptcy Court for the 23 - 0/5 (If known)		ict of

FILED 128 AUG 28 PM2:05 CLERK, US COURT, PAMP

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ ************************************
and so, is all issues, from Suredule Ab	•
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	s
Part 2: Summarize Your Liabilities	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your liabilities Amount you owe \$ \$ + \$ \$
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ \$
	W. () () () () () () () () () (

D.	. otor 1	First Name	Middle Name	Last Name	3		C	Case number ((W known)		
Р	art 4:	Answer 1	These Quest	ions for Adm	inistrative an	d Statisti	ical Record	İs			
6.	Are yo	ou filing for	bankruptcy ur	der Chapters 7	, 11, or 13?						
And the second s	☐ No). You have n	othing to repor	t on this part of	the form. Check	this box an	nd submit this	form to the	court with yo	ur othe	er schedules.
7.	What k	kind of debt	do you have?	n ann an ann an an ann an an ann an ann an a	од от отком том в от от 8-то то выше из верходителя в откусу усоход	entari internet e vene anterese un erup negare e un	Tilderhort de erriras esta tiba vatirar est orazones segu	ет от стравания в соверх и р его веста.	BUTCHER PUTTIGE STEEL DET	Official company and a second contraction of the second contraction of	APP AT BENGLIGHT SEN STOLET FROM FRY VAN S TE ABBES SEN EN VELVE STORES STOLET SEN STOLET STOLET STOLET STOLET S
	☐ Yo fan	ur debts are nily, or house	primarily cor shold purpose."	sumer debts. (11 U.S.C. § 10	Consumer debts 1(8). Fill out lines	are those ' s 8-9g for s	incurred by a tatistical purp	n individual oses. 28 U.S	primarily for S.C. § 159.	a perso	onal,
	Yo this	ur debts are s form to the	not primarily court with your	consumer deb other schedules	ts. You have no	thing to rep	oort on this pa	rt of the form	n. Check this	box a	nd submit
8.	From t	the Stateme. 122A-1 Line	nt of Your Cui 11; OR, Form 1	rent Monthly Ir 22B Line 11; OI	come: Copy you R, Form 122C-1	ur total curr Line 14.	rent monthly is	ncome from	Official	ም ሺ የ የመ. ምርያ ያቀርስ የሚያ	BETTER STOCKHOLDER BETTER
				and the second of the second o	e a conservações estas tentes transferente conference	n was de militer de vers tablement au ausge eg	ONE OF THE PROPERTY OF THE PRO	okandigana 1921-1930 i angana kanang	e de la composition	Parameter (SMA) (SESSE), SE	andere en

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

ebtor 1 _	DENINI S First Name	F	GREEN SR
ebtor 2	PREI NURTHE	Middle Name	Last Name
Spouse, if filing)	First Name	Middle Name	Last Name
nited States B	ankruptcy Court for the:	Dis	trict of
ase number	23-01582		
		· · · · · · · · · · · · · · · · · · ·	

Check if this is an amended filing

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Reside	nce, Building,	Land, or Other Real Estate You Own or Hav	re an Interest In	
1. Do you own or have any legal or	equitable intere	st in any residence, building, land, or similar prop	erty?	
No. Go to Part 2.				
Yes. Where is the property?				
1.1. 7138 FAIRWHY D Street address, if available, or of	OR South	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured dathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
		☐ Land	\$ 360,000	\$ 28,000
FAYETTEUILE (PA 17222 tate ZIP Code		Describe the nature of interest (such as fee the entireties, or a life	of your ownership simple, tenancy by
		Who has an interest in the property? Check one.	•	,,
FRANK LIN County		Debtor 1 only		
County		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
		Other information you wish to add about this it property identification number:	em, such as local	
1.2. Street address, if available, or other streets.		☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: as Secured by Property.
Sheet address, it available, of ou	ner description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	
		Land	\$	\$
City St	ate ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one. Debtor 1 only		
County		Debtor 2 only		
y		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	property
		Other information you wish to add about this iter property identification number:	m, such as local	

	First Name Midd	lle Name Last Name	Case number (# known)					
1.3.	Street address, if availab	le, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D			
			Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of to portion you own?			
			Land	\$	\$			
			☐ Investment property					
	City	State ZIP Code	Timeshare	Describe the nature of interest (such as fee				
			Other	the entireties, or a lif				
			Who has an interest in the property? Check one.					
	County		Debtor 1 only					
			Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is as	ommunity property			
			At least one of the debtors and another	(see instructions)	minumity property			
			Other information you wish to add about this ite	em, such as local				
			property identification number:					
۱dd t	he dollar value of the	portion you own for a	ll of your entries from Part 1, including any entrie	s for pages	•			
ou t	nave attached for Part	1. Write that number	here.	·····→	Ψ			
rt 2: you d	Describe Your of the sound of t	gal or equitable intere	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts	not? Include any vehicles and Unexpired Leases.	S			
you o	own, lease, or have leg that someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic	le, also report it on Schedule G: Executory Contracts	not? Include any vehicle: and Unexpired Leases.	5			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic	le, also report it on Schedule G: Executory Contracts	not? Include any vehicles and Unexpired Leases.	S			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic	le, also report it on Schedule G: Executory Contracts	and Unexpired Leases.				
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es	gal or equitable intere es. If you lease a vehicl s, sport utility vehicles	le, also report it on Schedule G: Executory Contracts on the second seco	and Unexpired Leases. Do not deduct secured clathe amount of any secure	ilms or exemptions. Put d claims on Schedule D			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model:	gal or equitable intere es. If you lease a vehicles, sport utility vehicles CHEW TopAA	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	and Unexpired Leases. Do not deduct secured class the amount of any secure Creditors Who Have Claim	ilms or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW Traph A 2018	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any secure Creditors Who Have Clain	ilms or exemptions. Put d'claims on <i>Schedule E</i> ns Secured by Property Current value of t			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage:	gal or equitable intere es. If you lease a vehicles, sport utility vehicles CHEW TopAA	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property?	ilms or exemptions. Put d'claims on <i>Schedule E</i> ns Secured by Property Current value of t			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW Traph A 2018	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secure Creditors Who Have Claim	ilms or exemptions. Pu d'claims on <i>Schedule E</i> ns Secured by Property Current value of t			
you o own Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW Traph A 2018	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property?	alms or exemptions. Pu diclaims on <i>Schedule I</i> ns Secured by Properly Current value of t portion you own?			
you (own Cars, N. Car	wn, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW TopAla 2018 95000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property?	alms or exemptions. Pu diclaims on Schedule I ns Secured by Property Current value of t portion you own?			
you cown Cars, I N Y Y Y y y y y y y y y y y y y y y y y	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information:	gal or equitable interees. If you lease a vehicles is, sport utility vehicl	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property?	alms or exemptions. Pud claims on <i>Schedule Lins Secured by Properly</i> Current value of toportion you own?			
you cown Cars, N Y 3.1.	wwn, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make:	gal or equitable intereses. If you lease a vehicles, sport utility vehicles CHEW TopAAA 2018 95000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 14,6000	alms or exemptions. Purificial delims on Schedule Ens Secured by Property Current value of the portion you own? \$ 13,800 ims or exemptions. Purificial delims on Schedule Delims on S			
you cown Cars, N Y 3.1.	own, lease, or have legathat someone else driven vans, trucks, tractors of essembles with the control of the co	gal or equitable interees. If you lease a vehicles is, sport utility vehicl	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ 14,6000000000000000000000000000000000000	alms or exemptions. Put dictaims on Schedule Dins Secured by Property Current value of t portion you own? \$ 13,800			
you cown Cars, N Y 3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW TopAla 2018 95000 one, describe here: Pantaia GRAN PRIX 2006	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ 14,000	alms or exemptions. Put dictaims on Schedule Das Secured by Property Current value of t portion you own? \$ 13,800 ims or exemptions. Put dictaims on Schedule Das Secured by Property Current value of the			
you cown Cars, N Y 3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: was or have more than Make: Model: Year: Approximate mileage:	gal or equitable interees. If you lease a vehicles is, sport utility vehicl	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 14,6000	alms or exemptions. Pud claims on Schedule Less Secured by Property Current value of the portion you own? \$ 13,800 ims or exemptions. Public claims on Schedule Less Secured by Property Current value of the secured secured by Property			
you cown Cars, N Y 3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year:	gal or equitable interees. If you lease a vehicles, sport utility vehicles CHEW TopAla 2018 95000 one, describe here: Pantaia GRAN PRIX 2006	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 3 only At least one of the debtors and another	Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ 14,000	alms or exemptions. Put dictaims on Schedule Dins Secured by Property Current value of the portion you own? \$ 13,800			

Case number (if known)

Part 3: **Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?	Current value of the
	portion you own? Do not deduct secured claims
C Universal and Control of Contro	or exemptions.
Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
No	
Yes. Describe	\$ 3000.00
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☐ No ☐ Yes. Describe	\$ 500-
8. Collectibles of value	age in many fragment.
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
Yes. Describe	\$
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
☑ No	
Yes. Describe	\$
10. Firearms	and the state of t
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	\$ 200.00
	\$ 200.00
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe	\$ 200.
12. Jeweiry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
□ No	. 100
Yes. Describe	\$ 700.
13. Non-farm animals Examples: Dogs, cats, birds, horses	
□ No	7 2 4
Yes. Describe	\$ 25.00
14. Any other personal and household items you did not already list, including any health aids you did not list	
☑ No	T T T T T T T T T T T T T T T T T T T
Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$
wit vi trino silet ilulibei liele	7

	bt		

irst Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	

ase number (# known)
ase number (if known)

Part 4:

Describe Your Financial Assets

	legal or equitable interest in	any of the following?	- 144 - 144 - 144	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash	havo in vous wallot in vous bos	ma ia a aafa daasa Wha a a ha ha ha h		
_	nave in your wallet, in your nor	ne, in a safe deposit box, and on hand when y	ou file your petition	
☐ No ☑ Yes			Cash: 300 -	
,			Cash:	\$
17. Deposits of money Examples: Checking, s and other si	eavings, or other financial accou imilar institutions. If you have m	unts; certificates of deposit; shares in credit uni nultiple accounts with the same institution, list e	ons, brokerage houses, ach.	
☐ Yes		Institution name:		
	17.1 Checking apparent			
	17.1. Checking account:			\$
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:		-	\$
	17.8. Other financial account:	-		\$
	17.9. Other financial account:			\$
18. Bonds, mutual funds, Examples: Bond funds, No		erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				\$
				\$
				\$
19. Non-publicly traded si an LLC, partnership, a	tock and interests in incorpor and joint venture	rated and unincorporated businesses, inclu	ding an interest in	
No	Name of entity:		% of ownership:	
Yes. Give specific information about			0%%	\$
them			%	\$
			0%%	\$

Yes. Give specific information.....

Debtor 1	First Name	No. J. M. N.		Case number (# known)	
	rirst Name	Middle Name	Last Name		
CONTRACTOR PROPERTY AND ASSESSED.	announce de abble of the letter of the lette	er har seminateriarrendeten er derrem soort ist ekstepater aufgebelichsten oortoo	enter en		a de meile (), el en la superioridada procupações de constitutos de constituto de cons
	ests in insura				
		lisability, or life insurar	ice; health savings account	(HSA); credit, homeowner's, or renter's insurance	
M N					
LI Ye	es. Name the i of each pol	nsurance company licy and list its value	Company name:	Beneficiary:	Surrender or refund value:
					\$
					\$
					\$
32. Any ii	nterest in pro	perty that is due you	from someone who has d	ied	
prope	are the benefi rtv because so	iciary of a living trust, e omeone has died.	xpect proceeds from a life in	nsurance policy, or are currently entitled to receive	
M No	-				
		ic information			
	oo. Orre specii	io mornation			\$
33. Claim	s against thir	d parties, whether or	not you have filed a laws	uit or made a demand for payment	
\ <u>-</u> /	ples: Accident	s, employment dispute	s, insurance claims, or right	s to sue	
M No					
∐ Ye	es. Describe e	ach claim,			
		'			<u> </u>
34. Other	contingent a	nd unliquidated claim	s of every nature, includi	ng counterclaims of the debtor and rights	
M No					
		ach claim.	anne nametyery af all salver are le sar sansan en e un journe train (Marie William) (Marie William) (Marie William)		not-en y
	ss. Describe ea	ach Gaim.			•
35. Any fi	nancial asset	s you did not already	list		
XX No)	[1
¹☐ Ye	es. Give specif	ic information			
		L			•
36 Add ti	he dollar valu	e of all of your entries	s from Part A including a	y entries for pages you have attached	
	4 4 544 64 45		o nom rant 4, moluding ai		2
CELLINATE CERTIFICATION AND AN OLOMbridge	***************************************		THE CHARGE STREET COSTS IN THE PROPERTY OF THE	THE LOCAL PROPERTY OF THE CONTROL OF	
Part 5:	Describe	e Any Business-F	Related Property You	Own or Have an interest in. List any r	eal estate in Part 1.
27 Do voi	u own or have	any logal ar aquitab	le interest in any busines:		
	o. Go to Part 6.		ie interest in any busines:	s-related property?	
	s. Go to Part 6.	-			
- 10	is. Go to line 3	· 6.			
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
38. Ассо ц	ints receivabl	e or commissions yo	u already earned		
No.			valida		
_	s. Describe				7
	a. Describe				\$
30 (\# =	nauinma-4 f	implement and the second			
		urnishings, and supp		machines, rugs, telephones, desks, chairs, electronic devices	
No		computors, sonware	, modems, printers, copiers, tax	macinica, ruga, talepriones, desks, chairs, electronic devices	
7,110	s. Describe				7
- re	a. Describe	•••			\$
		Constitution of the Consti	The state of the s		_i

Fill	in this int	formation to identi	fy your case:				
Det	otor 1 _	DENNIS	F	GREEN			
	otor 2	rifst Name	Middle Name	Last Name			
(Spo	ouse, if filing)	First Name	Middle Name	Last Name			
Uni	ted States E	Sankruptcy Court for th		District of			
	se number (nown)	23-0	15 52			☐ Check if thi amended fi	
Off	icial F	orm 106C					
Sc	hed	ule C: T	he Pro	perty You	Claim as Exemp	t 04	4/22
Using space	the prope is neede	erty you listed on So	to this page as	perty (Official Form 106/	gether, both are equally responsible for s A/B) as your source, list the property that additional Page as necessary. On the top	you claim as exempt. If more	
of an retire limits	y applicatement fund the exem	ole statutory limit. ds—may be unlimi	Some exemption ted in dollar an lar dollar amoul	ons—such as those for nount. However, if you nt and the value of the	fair market value of the property bein health aids, rights to receive certain i claim an exemption of 100% of fair ma property is determined to exceed that	penefits, and tax-exempt orket value under a law that	
Pai	it 1: Id	entify the Prope	rty You Clain	n as Exempt			······································
)	☑ You an ⊠ You an	e claiming state and e claiming federal e	l federal nonban xemptions. 11 L	kruptcy exemptions. 11 J.S.C. § 522(b)(2)	your spouse is filing with you. U.S.C. § 522(b)(3) pt, fill in the information below.		
	Brief desc Schedule	cription of the proper A/B that lists this p	erty and line on roperty	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exem	ption
				Copy the value from Schedule A/B	Check only one box for each exemption.	· · · · · · · · · · · · · · · · · · ·	,
		Because of the second	\$	School A	* 4	3	
	Brief descriptior	n: ———	-	\$	- \$	•	
	Line from Schedule	A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
	Brief			•	□s		
	descriptior Line from	1:		Ψ	100% of fair market value, up to		
	Schedule /	A/B:			any applicable statutory limit		
	Brief description			\$	□s		
i	Line from Schedule				100% of fair market value, up to any applicable statutory limit		
				f more than \$189,050? years after that for case:	s filed on or after the date of adjustment.)		
	☐ No		•	-	o. aajaoanion.)		
Ţ	Yes. Di	d you acquire the p	roperty covered	by the exemption within	1,215 days before you filed this case?		
	☐ No						

First Name	Middle Name	

Last Name

Case number (# known)

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	□s	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	- s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	0 s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	77.
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line fromSchedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	- s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B;		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	- \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your cas	e:			
Debtor 1 DENNIS First Name Middle N	GUSCO ame Lest Name			
Debtor 2 (Spouse, if filling) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the:	District of			
Case number				
(If known)			Check amende	
Official Forms 400D			amend	eu illing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secur	ed by Pro	perty	12/15
information. If more space is needed, copy additional pages, write your name and cas 1. Do any creditors have claims secured b	y your property?	and attach it to this	form. On the top of	t any
No. Check this box and submit this formYes. Fill in all of the information below.	n to the court with your other schedules. You have nothi	ng else to report on	this form.	
		1		
Part 1: List All Secured Claims				
for each claim. If more than one creditor he As much as possible, list the claims in alph	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name / 2160 Superior AVE	7138 FAIRWAY DR South			
Number Street	FAYETTEVILLE PA 17222			
	As of the date you file, the claim is: Check all that apply.			
CIEVELAND OHIO 44114	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	_		
community debt				
Date debt was incurred	Last 4 digits of account number	erra an waaring as a saar waa saar ah	CALVELY, TO AN ESSAYS SEEN AS A CHARGE AN ARE SERVED AS COLORS OF A CHARGE AS A CHARGE AS A CHARGE AS A CHARGE A	endering generalism and according
Creditor's Name	Describe the property that secures the claim:	\$	\$	5
BOX 76814				
Number Street	A She data and the she she she she she she she she she s			
	As of the date you file, the claim is: Check all that apply. Contingent			
LOS ANGELES (A 9007)E	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	_		
community debt				
Date debt was incurred	Last 4 digits of account number	andra androgramo a superfectable por control of the	en elle deletera en l'inn, sou artikelle exceptive del en este deletera en l'actività del deletera en l'activi	ikk k man sakannyannya makannya maka sakannya mak
Add the dollar value of your entries in C	column A on this page. Write that number here:	\$	1	

n	shte	~	4

Einet Marro	Adiadalla Marra	I and Manage

Case number	(if known)			

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	or's Name	Describe the property that secures the claim:	\$	\$	\$
Numbe					
-		As of the date you file, the claim is: Check all that apply. Contingent			
City	State ZIP Code	Unliquidated Disputed			
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.			
Del	otor 1 only	An agreement you made (such as mortgage or secured car loan)			
☐ At k	otor 1 and Debtor 2 only east one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
	eck if this claim relates to a nmunity debt		-		
Date de	ebt was incurred	Last 4 digits of account number			
04:5	обом жене и деней и де В Name	Describe the property that secures the claim:		ktisis cares paeras a cuerenden sucurent accumentation escurence (Turning Live (1942) on the model of the live (1942) of the
Numbe					
Numbe	s Succe	As of the date you file, the claim is: Check all that apply.	J	•	
		Contingent			
City	State ZIP Code	☐ Unliquidated ☐ Disputed			
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.			
	tor 1 only	An agreement you made (such as mortgage or secured			
	otor 2 only	car loan)			
	otor 1 and Debtor 2 only east one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
_		Judgment lien from a lawsuit Other (including a right to offset)			
	eck if this claim relates to a nmunity debt	Other (including a right to offset)	-		
Date de	bt was incurred	Last 4 digits of account number			
	r's Name	Describe the property that secures the claim:	\$	2	era anna ammentanti maast ovelt das nie taron. et
Credito	rs name				
Numbe	r Street				
		As of the date you file, the claim is: Check all that apply.			
City	State ZIP Code	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
	ves the debt? Check one.	Nature of lien. Check all that apply.			
	tor 1 only tor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
	tor 2 only tor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a	Other (including a right to offset)			
	bt was incurred	Last 4 digits of account number			
	Add the dollar value of your entries	in Column A on this page. Write that number here:	•		
H		add the dollar value totals from all pages.	\$		

Circl Name	Middle Name	Lead Marco	

Case number (if known)

		i .								
Par	t 2:	List	Others	to B	e Noti	fied fo	r a Deb	t That Yo	u Alread	v I ista

ou nave mor e notified fo	ng to collect from you for e than one creditor for a r any debts in Part 1, do	ny of the debts tha	t vou listed in Part 1.	list the additional creditors here. If you do not have additional persons t
				On which line in Part 1 did you enter the creditor?
Name		· · · · · · · · · · · · · · · · · · ·		Last 4 digits of account number
Number	Street			
			· · · · · · · · · · · · · · · · · · ·	
City	PRINCIPLE STORY OF THE STORY OF	State	ZIP Code	NO ASSENCE VALUE OF THE PROPERTY OF THE PROPER
]				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			— week
City	ON LINE HE STEP HERE STEPS SEEMS SEED ON STEPS HERE STEPS HERE SEEDS ON THE STEPS SEEDS OF THE STEPS SEEDS SEEDS OF THE STEPS SEEDS SEED	State State State	ZIP Code	And the second s
Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
				Last + digits of account number
Number	Street			
City	ilov 7864 ilikolov i pravinakova karikakova karikaka karikakaka karikaka karikaka karikaka karikaka karikaka k	State	ZIP Code	28-29-38-20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City	vol 22 NNOvol 22 LLC A personal los outros anticipatos de la companya de la companya de la companya de la comp	State	ZIP Code	-
			- 100 market in section (100 to 100 t	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			- Address
				_
City	ikkan piakan kanangan kapa atawa and inakangan atawa ana	State State	ZIP Code	
			a consequence of AV 4.	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
			, , , , , , , , , , , , , , , , , , , 	
City		State	ZIP Code	- 8

Fill in this in	nformation to identify yo	our case:				
	Devives		GREEN			
Debtor 1	DENNIS First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)) Sint Name	Middle Name				
			Last Name			
United States	Bankruptcy Court for the:		rict of		Па	
Case number (If known)	_ 23-01532					ck if this is a
Official F	Form 106E/F					
Sched	ule E/F: Cred	litors W	ho Have Unsecured Clair	ms		12/15
A/B: Property creditors with needed, copy any additiona	· party to any executory · (Official Form 106A/B) · partially secured claim	contracts or u and on Sched s that are liste t out, number t e and case nu	•	list executory c (Official Form ' ured by Propert	ontracts on S 106G). Do not	include any
· · · · · · · · · · · · · · · · · · ·						* * * * * * * * * * * * * * * * * * *
No. Go	editors have priority unso to Part 2.	secured claims	s against you?			
Yes.	<u> </u>	/ _/ _				
each claim nonpriority unsecured	amounts. As much as po claims, fill out the Continu	of claim it is. If ssible, list the c uation Page of I	editor has more than one priority unsecured claim, list a claim has both priority and nonpriority amounts, list t laims in alphabetical order according to the creditor's Part 1. If more than one creditor holds a particular claim	hat claim here a	nd show both	priority and
(For an ex	planation of each type of t	claim, see the in	nstructions for this form in the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1				_	_	
Priority Cred	litor's Name		Last 4 digits of account number	2	_ \$	_ \$
Number	Street		When was the debt incurred?			
Number	Subst		An of the determinant to the state of the st			
			As of the date you file, the claim is: Check all that app	ly.		
City	State	ZIP Code	☐ Contingent ☐ Unliquidated			
	irred the debt? Check one.		Disputed			
Debtor			- Disputed			
☐ Debtor			Type of PRIORITY unsecured claim:			
	1 and Debtor 2 only		☐ Domestic support obligations			
_	t one of the debtors and anot		Taxes and certain other debts you owe the government	t		
☐ Check	t if this claim is for a com	munity debt	Claims for death or personal injury while you were			
_	im subject to offset?		intoxicated			
□ No			Other. Specify	_		
Yes	The second and the second and proposed the second second to the second as the second second second second second	1.1.1000000000000000000000000000000000	TOTAL CONTINUES OF THE SECOND STREET SECOND		ing MMMLTing own years in the day of the an analysis of the day of the analysis of the day of the d	
.2			Last 4 digits of account number	•		•
Priority Cred	litor's Name		When was the debt incurred?	4		_ 3
Number	Street		anien was the dept incured:			
Nullibei	Suber		As of the date you file, the claim is: Check all that appl	v.	•	
			☐ Contingent	•		
City	State	ZIP Code	☐ Unliquidated			
Who incu	rred the debt? Check one.		☐ Disputed			
Debtor			·			
Debtor	•		Type of PRIORITY unsecured claim:			
	1 and Debtor 2 only		Domestic support obligations			
	t one of the debtors and anot	her	Taxes and certain other debts you owe the government			
	r if this claim is for a com		 Claims for death or personal injury while you were intoxicated 			
	im subject to offset?		Other. Specify	_		
☐ No ☐ Yes						

Deb	 4

irel Namo	Middle Nome	l and blame	

Posity Custator's Name	listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unli	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unli		When was the debt incurred?			
Contingent Unliquidated Unliqu	Number Street				
Unliquidated Disputed the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 have 1 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 on		As of the date you file, the claim is: Check all that apply.			
Unliquidated Disputed the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 have 1 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 on		Continuent			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 one of the debtors and another Check if this claim is for a community debt Configer Debtor 1 and Debtor 1 and Debtor 2 only No Yes Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 4 only Debtor 4 and Debtor 5 only Debtor 4 and D	City State 7IP Code				
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Turses and certain other debts you owe the government Claims for death or personal injury while you were infoxicated Other. Specify		· · · · · · · · · · · · · · · · · · ·			
Debitor 2 only	Who incurred the debt? Check one.	Car Disputed			
Debitor 2 only	Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only					
At least one of the deblors and another					
Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Other. Specify No Yes Y		☐ Taxes and certain other debts you owe the government			
Other. Specify Othe	At least one of the deptors and another				
Is the claim subject to offset? No Yes	Check if this claim is for a community debt				
No	•	U Other. Specify			
Yes	Is the claim subject to offset?				
Priority Creditor's Name Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	□ No	•			
Number Street Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another City State City Code of the debtors and another City State City Code of the debtors and another City State City Code of the debtors and another City State City Code of the debtors and another City Code of the debtors only City Code of the debtors and another City Code of the debtors only City Code of the debtors and another City Code of the debtors only City Code of the debtor only City City City City City City City Cit	☐ Yes				
Number Street As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed	KT-mahahatikat-ki-no-kat-kat-kat-kat-kat-kat-kat-kat-kat-kat	EXECUTATION OF THE STATE OF THE	and the common or a common of the common common of the com	тиме церма очения самати	CANNEL CONTRACTOR AND
Number Sirest Sirest Sirest Sirest As of the date you file, the claim is: Check all that apply. Confingent Unliquidated Disputed			•	·	•
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Priority Creditor's Name	Last 4 digits of account number	a	•	. Þ <u> </u>
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		When were the debt income d?			
Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Who incurred the debt? Check one. Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated of the debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtor and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another	Number Street	when was the dept incurred?			
Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Who incurred the debt? Check one. Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated of the debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtor and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another Claims for death or personal injury while you were intoxicated of the debtors and another		As of the date you file the claim is: Check all that each			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Last 4 digits of account number \$ \$ \$ \$ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 nam Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt		As of the date you me, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Who incurred the debt? Check one. Who incurred the debtor 2 only Debtor 1 only Debtor 1 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you were government Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you were intoxicated Other. Specify Other. Specify		☐ Contingent			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. City State ZiP Code Unliquidated Disputed Who incurred the debtors and another Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Check if this claim is for a community debt Type of PRIORITY unsecured claim: Disputed Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	City State ZIP Code	☐ Unliquidated			
□ Debtor 1 only □ Debtor 2 only □ Demostic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ No □ Yes □ Last 4 digits of account number □ Street □ Check if the claim subject to offset? □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify □ Defect of the debtors and another □ Check if this claim is for a community debt □ Other. Specify □ Check on the debtor 2 only □ Debtor 1 and Debtor 2 only □ Destror 1 and Destror 2 only □ Destror 1 a		☐ Disputed			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ No □ Yes □ No □ Yes □ Last 4 digits of account number □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ No □ Yes □ No □ Yes □ Last 4 digits of account number □ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Who incurred the debt? Check one.				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ No □ Yes □ Namber Street □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a communi	Debtor 1 only	Type of PRIORITY unsecured claim:			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Last 4 digits of account number □ \$ \$ \$ \$ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Taxes and certain other debts you were intoxicated □ Other. Specify □ Taxes and certain other debts you were intoxicated □ Other. Specify □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Other. Specify	Debtor 2 only				
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ No □ Yes □ Number Street □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Uniquidated □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Claims for death or personal injury while you were intoxicated intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were intoxicated □ Claims for death or personal injury while you were					
Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify Is the claim subject to offset? No Yes Last 4 digits of account number \$					
Other. Specify Other. Specify Is the claim subject to offset? No Yes Priority Creditor's Name Last 4 digits of account number \$ \$ \$ \$ \$ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify					
Is the claim subject to offset? No Yes Last 4 digits of account number \$ \$ \$ \$ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other.	☐ Check if this claim is for a community debt				
□ No □ Yes Last 4 digits of account number □ \$ \$ \$ \$ ■ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 3 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify □ Othe		Uther. Specify			
Yes Last 4 digits of account number \$ \$ \$ \$	-				
Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	□ No				
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify	☐ Yes				
When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify	о 1770 года о також на водина били на постоя на остоя на подат и тод во стиго из селение на надажение уста и од Стакож	CONTENTION OF THE ACTION OF THE CONTENT OF THE CONT	# «П. С. П. Г. С.	ene nere neressament makain totakka	NOTE THE THE PLANT OF THE PARTY
Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Driving Conditions Name	Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Priority Creditor's Name				
As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Number Christ	When was the debt incurred?			
City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify	Number Street				
City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 1 and Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		As of the date you file, the claim is: Check all that apply.			
City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		☐ Contingent			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	City State ZIP Code				
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	5.00 EA 550C				
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Other. Specify	Who incurred the debt? Check one.	— Disputed			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify		Type of PRIORITY unsequend olaims			
Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify	•	. Jps of Finoral Funsecuted cidill.			
At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify					
Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify					
☐ Check if this claim is for a community debt intoxicated Other. Specify	At least one of the deptors and another	Claims for death or personal injury while you were			
Other. Specify	Check if this claim is for a community debt	intoxicated	Residential debitation were considered to	Programment actions and an expension of	тын ж.4 ур. Сатан Ж.Сынай тахын фил
Is the claim subject to offset?	, - 	U Other. Specify			
	s the claim subject to offset?				
	□ No				

_		
\neg	btor	4

F:-4	Al

1 4	 NI.	

Part 2:	List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the Yes					
	List all of your nonpriority unsecured claims in the alphabetical or nonpriority unsecured claim, list the creditor separately for each claim, included in Part 1. If more than one creditor holds a particular claim, list claims fill out the Continuation Page of Part 2.	For each claim listed, identify what type of claim it is. Do not	liet claime already			
			Total claim			
.1		Look A distance of a constant	procure and the contract of th			
	Nonpriority Creditor's Name	Last 4 digits of account number	\$			
		When was the debt incurred?				
	Number Street					
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Who incurred the debt? Check one.	☐ Unliquidated				
	Debtor 1 only	☐ Disputed				
	Debtor 2 only	•				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another					
		Student loans				
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts				
	□ No □ Yes	Other. Specify				
.2						
لــــــــــــــــــــــــــــــــــــــ		Last 4 digits of account number	\$			
	Nonpriority Creditor's Name	When was the debt incurred?				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	City State ZIP Code	Contingent				
	Who incurred the debt? Check one.	Unliquidated				
		Disputed				
	Debtor 1 only	□ Disputed				
	Debtor 2 only	Type of NONDDIODITY upgeoused slaims				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce				
		that you did not report as priority claims				
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts				
	□ No	Other. Specify				
	☐ Yes					
.3	0	от завителять бил тементический положений выполнений положений выполнений выс	THE STATES AND STATES AND STATES THE STATES AND STATES AND AND STATES.			
		Last 4 digits of account number	•			
	Nonpriority Creditor's Name	When was the debt incurred?	\$			
	Number Street					
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.	☐ Contingent				
		Unliquidated	:			
	Debtor 1 only	☐ Disputed				
	☐ Debtor 2 only	·				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another					
	Cheek William Information 1.	Student loans				
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce				
	Is the claim subject to offset?	that you did not report as priority claims				
	□ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify	and the state of t			

n -		4
IJA	btor	7

	_	
Fire	4 4	Jame

Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

N		Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Cheek or		☐ Unliquidated	
Who incurred the debt? Check of	IE.	☐ Disputed	
Debtor 1 only Debtor 2 only		* (MANAGE =	
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and a	nother	Student loans	
		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt	you did not report as priority claims	
Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
□ No		Other. Specify	
☐ Yes			
FB (print \$2000) TV (CA) A TAINT TO THE MEMBERS AND STREAM TO THE STREAM AND A STREAM TO A STREAM AND STREAM A	с), коган тимпет такжетаруу и компетина башарын аруык мануулган ийи илимпетин колонун колонун колонун колонун Колонун тимпет такжетаруу и компетин колонун колонун колонун колонун колонун колонун колонун колонун колонун к		er ar hann stade et an en
Nonpriority Creditor's Name		Last 4 digits of account number	\$
Trouploiny Cieuliui S Name		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	□ Contingent	
Million Devices and Add and Ad		☐ Unliquidated	
Who incurred the debt? Check or	e.	☐ Disputed	
Debtor 1 only			
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors and a	nother	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a co	mmunity debt	you did not report as priority claims	
		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify	
□ No			
U Yes	. ምናላ እና ጀመሪያ የቀጥ መጀመር የነበር መመመር የነበር ነው የመመር የነበር ነው		
		Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
		Unliquidated	
Who incurred the debt? Check on	e .	Disputed	
Debtor 1 only		_ superior	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors and ar	other	 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a co	mmunity debt	you did not report as priority claims	
Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debtsOther. Specify	
□ No		Outer. Specify	
☐ Yes			

n -		4
ŧЮ	DIOL	1

iret Nome	Middle Name	I Ni		

Case number (if known)	
------------------------	--

Part 3:

List Others to Be Notified About a Debt That You Already Listed

			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			-
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
City The Commence of the Comme	State	ZIP Code	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		□ Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
lame		o o conservante de la conservante del la conservante del la conservante de la conser	On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		□ Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
łame			On which entry in Part 1 or Part 2 did you list the original creditor?
vallo			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
eggic and a filtream on 4000 at 2	CONTRACTOR STANDARD S	and the second desired and the second se	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Charleson) D. Dadde Continue with Divide Lines and Chris
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims
		-	Last 4 digits of account number
City	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street	——————————————————————————————————————	☐ Part 2: Creditors with Nonpriority Unsecured
	· · · · · · · · · · · · · · · · · · ·		Claims
City	State	ZIP Code	Last 4 digits of account number
ROMERS HALLER, W.F. CTREET, C.F.	Заис Экапина наталена или праводна в Сомаливная проставлена в подавления предоставления предоставления предоставления	LIF WIRE	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			• •
Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
		 	- Paritie
City	State	ZIP Code	Last 4 digits of account number

Case number (if known)____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+5
**************************************	6e.	Total. Add lines 6a through 6d.	6e.	<u>s</u>
3				Total claim
Total claims		Student loans	6f.	\$
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
		Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$

Fill	in this ir	nformation to iden	tify your case:			
Del	btor	DENNIS	F	GREEN		
		First Name	Middle Name	Last Name		
	btor 2 ouse If filing)	First Name	Middle Name	Last Name	_	
Uni	ted States	Bankruptcy Court for t	the: Distr	ict of		
	se number	_23-013	132			Check if this is an
						amended filing
						•
Off	ficial f	Form 106G				
Sc	hed	ule G: Ex	_ ecutory Ca	ontracts and	Unexpired Leases	40/45
					ether, both are equally responsible for sup	12/15
1. 2. 1	Do you h No. C Yes. I List sepa example, unexpired	ges, write your name and executor in the second file in all of the informately each person rent, vehicle least leases.	me and case number y contracts or unexp file this form with the c mation below even if t n or company with w e, cell phone). See th	r (if known). pired leases? court with your other schedu the contracts or leases are in rhom you have the contract ne instructions for this form	nber the entries, and attach it to this page. les. You have nothing else to report on this for isted on Schedule A/B: Property (Official Form ct or lease. Then state what each contract on the instruction booklet for more examples of	rm. n 106A/B). or lease is for (for f executory contracts and
			V	ontract or lease	State what the contract or lease is f	or
2.1	. \$) ·	and the second s	in the second of
1	Name					
o lamanana - e	Number	Street				
	City		State ZIP Code			
2.2	. TO SELECT PLANTS CONTROL OF		The Australia Mark Commission (Control of the Control of the Contr	THE PARTY OF THE STATE OF THE S	en de la composition de la composition en la composition de la com	
	Name		-			
1	Number	Street				
2 s. Saraskino	City	A NOW TO STREET MENT OF STONES AND TO STONE STON	State ZIP Code		or A VIDERAL DUSSER OF COUNTY of SANT COUNTS CONSOL PRINCIPAL . A STANLE SERVING COUNTY OF COUNT	
2.3						
and with the control of the control	Name		· · · · · · · · · · · · · · · · · · ·	**************************************		
· Carlo	Number	Street				
1000000	City	Ox ACTION THE COURSE OF THE ACTIONS IN	State ZIP Code	e negativani negativa ta negativa sa negativa sa negativa negativa negativa negativa negativa negativa negativ	TURNSHEST VOIT EN FEDRATEN FOL DAR ELEN SCHOOLS S. STOODERS HE FURNISHES FOR TURN LEASTERS FOR S. CONTREM FOR IN	s Sectionalistis per fundam is Allichamente detection in Section I. Section (Section 1)
2.4						
The state of the s	Name					
1	Number	Street				
	Cit					
1 TOTAL DISSE	City	BBBBBBBB NACH CO. STATEBOOK (TO KONESSE NOON) - CESSEEL VAN COMMENT	State ZIP Code	2000年8月1日 - 1917年 - 19		BISSNANGE VARIENNALIFE U SIRANA AMELININKA (AMELININKA (AMELINIKA)
2.5	Nome					
	Name					
1	Number	Street		· · · · · · · · · · · · · · · · · · ·		

ZIP Code

City

Fill in	n this information to identif	y your case:		
Debto	or 1 First Name	Middle Name	Last Name	_
Debto	or 2	TOTAL TRAITE	Fost Maille	
(Spous	se, if filing) First Name	Middle Name	Last Name	-
United	d States Bankruptcy Court for the	: District of		
	number			
(If kno	own)			☐ Check if this is
				amended filing
Offic	cial Form 106H			
Scł	nedule H: You	r Codebtors		12/1
re mi nd nu	ng together, both are equal	ly responsible for suppl ces on the left. Attach th	lvina correct information	Be as complete and accurate as possible. If two married per n. If more space is needed, copy the Additional Page, fill it or is page. On the top of any Additional Pages, write your name
	o you have any codebtors?	(If you are filing a joint ca	ase, do not list either spou	ise as a codebtor.)
	☐ No			
	Yes			
2. W	lithin the last 8 years, have	you lived in a communi	ty property state or terri	itory? (Community property states and territories include
	☑ No. Go to line 3.	siana, Nevada, New Mex	αιco, Pueπo Rico, Texas, \	Washington, and Wisconsin.)
	Yes. Did your spouse, form	er soouse, or legal equiv	alent live with you at the t	imo?
	No	or spouse, or logal equiv	alent live with you at the t	ane :
		tv state or territory did vo	u live?	. Fill in the name and current address of that person.
		sy chart or torritory and yo		I will the hame and current address of that person.
				
	Name of your spouse, former	spouse, or legal equivalent		
	Number Street			
	City	State	ZIP Code	
si Si Si	hown in line 2 again as a co chedule D (Official Form 10 chedule E/F, or Schedule G	debtor only if that perso 6D), S <i>chedule E/F</i> (Offic	on is a guarantor or cos	ebtor if your spouse is filing with you. List the person igner. Make sure you have listed the creditor on hedule G (Official Form 106G). Use Schedule D,
(Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
1	CROSS Country	MORTGAGE	1 D	Z M S S S S S S S S S S S S S S S S S S
	Name 2160 Superior Number Street			Schedule D, line
	2160 SupERIOR	AVE		Schedule E/F, line
	Number Street'	OHO	44114	Schedule G, line
—	Claveland City	State	<u> </u>	
.2		100 1001	and the second s	The second state of the se
	Name			Schedule D, line
	Number Street			Schedule E/F, line
	Number Street			☐ Schedule G, line
	City City Complete Co	State State	ZIP Code	
.3				
	Name			Schedule D, line
	Number Street		A STATE OF THE STA	Schedule E/F, line
	Number Street			☐ Schedule G, line

Official Form 1:23-bk-01582-HWV Doc 22 Filed 08/29/23 Entered 08/29/23 14:26:25 Desc Main Document Page 25 of 30

Dahtar	4	
Debtor		

Elent Marene	MAR N	 	

Case number (if Innown)	
-------------------------	--

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
3				Check all schedules that apply:
	Name			Schedule D, line
Tanahara Mara				☐ Schedule E/F, line
Tariffe and and an analysis of	Number Street			Schedule G, line
	City	State	ZIP Code	
3				Cahadida D. Kas
	Name			Schedule D, line
	Number	· · · · · · · · · · · · · · · · · · ·		Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	-
3	Name			Schedule D, line
	Name			☐ Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	-
3		е с тем в тем то в бого до доли на се обще в почет в с в поста на поста на пода в родине у подосно у до в посо		
	Name			Schedule D, line
				Schedule E/F, line
	Number Street			Schedule G, line
. 1	City	State	ZIP Code	
3				Schedule D, line
	Name			☐ Schedule E/F, line
	Number Street		7 11	Schedule G, line
				_
3.	City	State	ZIP Code	
	Name			Schedule D, line
	Hallo			Schedule E/F, line
	Number Street	· · · · · · · · · · · · · · · · · · ·		Schedule G, line
	City	State	ZIP Code	•
3	от сторов Стор и постигничний мести постигний постигний постигний достигний и достигний и достигний и достигни		Российской Моне и менера было на провен, консирал и пред свое и чен по вы держивающего для предвадения до до н	
	Name			Schedule D, line
				Schedule E/F, line
	Number Street			Schedule G, line
<u> </u>	City	State	ZIP Code	
2				
	Name	· · · · · · · · · · · · · · · · · · ·		Schedule D, line
				☐ Schedule E/F, line
	Number Street			Schedule G, line
elitropisch sens	City	State	ZIP Code	

Fill in this information to identif	fy your case:				
Debtor 1 DENNIS	F GRE	EN			
First Name Debtor 2	Middle Name Last Name	Check if the			
(Spouse, if filing) First Name	Middle Name Last Name	An am		-	makiking abaut 40
United States Bankruptcy Court for the	e: District of			nowing posi the following	petition chapter 13 g date:
Case number 23-01582 (If known)	?	MM / D	D/ YYYY	_	
Official Form 106J-2					
Schedule J-2:	_ Expenses for Sep	arate Household	of D	ebtor :	2 12/15
Debtor 2 have one or more deper only with respect to expenses for	rate household expenses ONLY IF indents in common, list the depende or Debtor 2 that are not reported on this form. On the top of any addition	ents on both Schedule J and this Schedule J. Be as complete and	form. An accurate	nswer the qu as possible.	estions on this form If more space is
1. Do you and Debtor 1 maintain	separate households?				
No. Do not complete this to Yes	form.				
2. Do you have dependents?	₩ No				
Do not list Debtor 1 but list all other dependents of Debtor 2	Yes. Fill out this information for each dependent			ependent's ge	Does dependent live with you?
regardless of whether listed as a dependent of Debtor 1 on Schedule J.			_		☐ No ☐ Yes
Do not state the dependents'					□ No
names.					☐ Yes ☐ No
					Yes
			_		□ No
					☐ Yes
					☐ No ☐ Yes
 Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1? 					
Part 2: Estimate Your One	oing Monthly Expenses	The state of the s	eran er st. mer utenmelstederfelde et erdemelse zer zer zer		
	ur bankruptcy filing date unless you	a are using this form as a supple	ment in a	Chanter 13 c	esse to report
expenses as of a date after the ba		a are coming time form as a supplier	ment in a	Chapter 13 C	ase to report
	on-cash government assistance if y			Verre erre	
	ed it on Schedule I: Your Income (C expenses for your residence. Inclu	·	Prince.	Your expe	
any rent for the ground or lot.	expenses for your residence. Inclu	de ilist mongage payments and	4.	\$	The state of the s
If not included in line 4:					
4a. Real estate taxes			4a .	\$	·
4b. Property, homeowner's, or			4 b.	\$	Colonia de
4c. Home maintenance, repair	• • •		4c.	\$	
4d. Homeowner's association	or condominium dues		4d.	\$	

Official Form 106J-23-bk-01582-HWW Doc 22 Fired 08/29/23 14:26:25 Descape 1 Main Document Page 27 of 30

_		
136	btor	7 7

Eint Name	Middle Name	 Lauri Managa	

Case number (# known)	
-----------------------	--

)			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.		7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d, Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other, Specify:	17b.	\$
	17d. Other, Specify:	17d.	\$
12	Your payments of alimony, maintenance, and support that you did not report as deducted from	174.	T
10.	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income).	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

De	ebtor 1	First Name M	ddle Name	Last Name			Case number (# kno	wn)			
21.	Other. S							21.	+\$		NAT A CONTRACTOR OF STREET
22 .	The resul	nthly expenses t is the monthly enses for Debtor	expenses of [Debtor 2. Copy the	e result to line 2	22b of Schedule	J to calculate the	22.	\$		
23.	Line not u	sed on this form.									
	D=										
24.				se in your expens							
				ying for your car lo ase because of a r							
	□ No.										
	☐ Yes.	Explain here:							MANAGEMENT TO LANGUAGE STREET,		The second secon
			hi maan ka silka 3 kalkali aa kii 1755 (a p-ng)aan parks 4 qaa k					Carrier Wood Constitution	TOTAL COLUMN TO SERVE TO SERVE THE SERVE	a thail for worse, resistance of the transmission of the desire constitution of the desire constitution of the	

Fill in this in:	formation to identify y	our case.	
Debtor 1	DEMNIS	F.	GREEN
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filling)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	District o	f
Case number	23-01582		
(If known)			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

oid you pay or agree to pay someone who is N	IOT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	•
nder penalty of periury. I declare that I have r	read the summary and schedules filed with this declaration and
Inder penalty of perjury, I declare that I have r nat they are true and correct.	read the summary and schedules filed with this declaration and
inder penalty of perjury, I declare that I have reat they are true and correct.	read the summary and schedules filed with this declaration and
nat they are true and correct.	read the summary and schedules filed with this declaration and
Dennis Spiens	read the summary and schedules filed with this declaration and
Inder penalty of perjury, I declare that I have reported they are true and correct. Signature of Debtor 1	read the summary and schedules filed with this declaration and Signature of Debtor 2
Dennis Spiens	*